

QUALITY ISSUE (WHY)	OBJECTIVES (QUALITY INITIATIVES)	PLAN OF ACTION (WHAT, WHO, BY WHEN)	ROP?	PERFORMANCE MEASURES	OUTCOME	COMPLETE DATE OF COMPLETION
				(How)		
Why were changes needed? Quality Dimension addressed Check those coming out of Quality Performance Roadmap (QPR)	Identify what team intends to accomplish by when Ex. To increase ... to 95% by Aug 3, 200...	A detailed description of what action(s) will take place, by who, by when		How will you measure success?	A description of success	Check off Complete and Enter Date
	<p>3. To facilitate navigation to DaD nutrition services and via DaD</p> <ul style="list-style-type: none"> ER- Clinical Leads Phone messages (Colleen to develop script by Sept 2012) Include DaD information with media events 	<p>RD Leaders to establish key areas where promotion of DaD is appropriate by Dec 2012.</p> <ul style="list-style-type: none"> Invite DaD to RD Leadership meeting by Nov 2012. <p>Clinical Leads to create awareness of DaD services as opportunities arise (e.g. ER, nutrition month, media events, phone messages, clinics) by March 2013.</p> <p>Invite DaD to service navigation project by June 2012.</p> <p>Investigate whether DaD can report on referral source by June 2012.</p>	N	<p># areas DaD services were promoted (N=x)</p> <p># RDs who direct people to DaD in voice mail message <u>Total # Rds</u></p> <p># calls received by DaD over a specific time period</p>	<p>Number of calls at DaD increased over reporting time.</p> <p>Number of areas that DaD has been promoted has increased over reporting time.</p>	

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<p>Quality Issue:</p> <p>Clinical Documentation/Integration of Nutrition Care Process in Practice</p> <p>Quality Dimension:</p> <p>Champion for Initiative:</p> <p>Recommendation (AC):</p> <p>QPR Flag:</p> <p>Strategic Direction: Build Sustainability Enhance Patient Experience</p>	<p>To integrate Nutrition Care Process (NCP) into dietetic practice via follow-up documentation:</p> <ul style="list-style-type: none"> Interval between documentation monitoring and evaluation <p><u>Assessment/Monitoring & Evaluation</u> To integrate Assessment/Monitoring & Evaluation IDNT language into practice.</p>	<p>Develop a follow up chart audit to determine baseline documentation elements (e.g. ADIME; interval between documentation) by June 2012.</p> <p>Complete chart audit at HSC, DLC, SOGH, GH, VGH, SBH, CH, MHC, RHC and one WRHA community nutrition area by June 2013 in both inpatient and ambulatory care areas.</p> <p>1. Establish an educational plan. (include ADIME charting; SMART goals).</p> <p>Conduct education session for WRHA RDs re: Assessment/Monitoring and Evaluation Language on Feb 3rd, 2012.</p> <p>2. Develop Linking NCP document using common diagnosis (top 20) by June 2013.</p> <p>2a. Practice Councils review and disseminate what nutrition indicators are indicated per diagnosis by December 2013.</p>	<p>N</p> <p>N</p>	<p>Audit tool and guidelines developed (Y/N)</p> <p>Chart audit completed (# completed/ total number of sites)</p> <p>Chart audit results (indicators per element)</p> <p><u># RD's attended education</u> Total # RDs</p> <p><u># diagnosis included in linking document</u> 20</p> <p>#nutrition indicators developed with evaluation scales</p>	<p>One nutrition indicator completed per practice council</p>	

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<p>Quality Issue: Optimize nutrition intake</p> <p>Quality Dimension:</p> <p>Champion for Initiative:</p> <p>Recommendation (AC):</p> <p>QPR Flag:</p> <p>Strategic Direction Enhance Patient Experience</p>	<ul style="list-style-type: none"> To determine feasibility and effectiveness of a med-pass program in an acute care environment to improve intake. Develop process, scales/tools for assessing intake Incorporating Monitoring and evaluation NCP 	<ul style="list-style-type: none"> Evaluate the Med Pass program (Medication Pass Nutrition Supplement Program) in adult acute care inpatient areas and determine next steps by June 2013. Develop tray check process with tools at HSC to monitor and evaluate intake by Dec 2012 Research project with U of M students to describe inpatient intake per unit based on tray check information by April 2013. 	N	<ul style="list-style-type: none"> Data collection tool developed and data reviewed. (Y/N) Report of recommendations completed. (Y/N) Action steps established (Y/N) Process and tool developed # areas implemented tray <u>check process</u> # areas Research project completed (Y/N) 		

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Quality Issue: Optimize nutrition intake Quality Dimension: Champion for Initiative: Recommendation (AC): QPR Flag:	<ul style="list-style-type: none"> • Determine effective calorie count process - Procure Nutrient Dense Food - Increase Awareness of Intake/Malnutrition 	<ul style="list-style-type: none"> • Trial new calorie count process at CH (RD records intake) by June 2013 - Investigate options for increasing nutrient density in food items by June 2012. - Develop Diet Compendium/Criteria revision plan with lens to enhance intake by June 2013. - Develop communication plan for disseminating Canadian Malnutrition Task Force Study results by June 2013. - Review ASPEN Malnutrition tools for applicability to practice for diagnosing malnutrition by June 2013. - Communicate HSC tray check research project results to key stakeholders by December 2013. 	N	<ul style="list-style-type: none"> - Trial completed. (Y/N) - # of new items introduced in the reporting period - Diet compendium revision plan complete.(Y/N) - Communication plan developed (Y/N) - Review completed (Y/N) <u># areas communicated to total # areas (N=6)</u> 		

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	<p>Advocate for adequate resources for people living in the community to optimize intake.</p> <p>Promote families and parents to feed infants according to evidence based guidelines.</p> <p>Promote intake according to CFG for immigrants/refugees/new Canadians with no English skills.</p> <p>Disseminate nutrition messaging to hard to reach populations (not currently in the health care system).</p>	<ul style="list-style-type: none"> - Complete Food Costing report by July 2012. <p>Disseminate results to key stakeholders and make available publicly.</p> <p>Complete health professional resource "Feeding Healthy Term Infants"</p> <ul style="list-style-type: none"> - Promote use of above resource by HCP by putting resource on-line. Include DaD. <ul style="list-style-type: none"> - Complete Nutrition Toolkit for EAL Teachers. - Evaluate above resource by July 2012. - Make available on stakeholder websites. <p>Develop interactive nutrition display for Red River Ex.</p>		<ul style="list-style-type: none"> - Report completed <p>Communication plan implemented (Y/N)</p> <p>- Resource completed (Y/N)</p> <p>Resource completed.(Y/N)</p>		

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Quality Issue: Nutrition Management Strategy for Obesity Quality Dimension: Champion for Initiative: Recommendation (AC): QPR Flag:	1. Establish a best practice guideline for nutritional management of obesity.	Review and adapt Alberta Health RD best practice guidelines by – December 2013 by VGH Bariatric surgery team <ul style="list-style-type: none"> Primary Care Practice / Acute Care Practice Council review, approve and adopt as appropriate Participate in the Acute Care Bariatric Management Working Group.	N	<u># guidelines reviewed</u> Total # guidelines <u># guidelines adapted</u> Total # guidelines <u># guidelines modified</u> Total # guidelines <u># guidelines approved</u> Total # guidelines		